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## REMARKS

Claims 1, 8 and 15-18 as attached have been formally amended for purposes of clarity in order to more clearly define the present claimed invention. Specifically, the above claims have been amended in order to positively recite in the body of the claim the inventive limitations previously contained in the preamble. As the amendments to the claims were performed to rearrange the limitations therein it is respectfully submitted that no new matter has been added by these amendments.

The claims have been amended for purposes of clarity by rearranging the limitations therein to define that the claimed system comprises a system for actively assigning tasks to work schedules to be performed by specific healthcare workers and medical devices and is NOT a treatment plan creation and manipulation system such as described by Macrae et al. Such treatment plan systems are not concerned with and do NOT manage, allocation of tasks to specific healthcare workers and medical devices. Treatment plan systems address the different problem of creating a treatment plan for a *patient* addressing the particular patient's requirements and monitoring progress of the patient against the plan and are not concerned with which particular workers or devices perform specific tasks. Treatment plans are concerned with the *patient* NOT *workers or devices performing tasks*. Support for the amendments is found in the existing claims and in the Application description in connection with Figure 6 and other places.

### **1. Rejection of claims 1 – 19 under 35 U.S.C. 102(b)**

Claims 1-19 are rejected under 35 U.S.C. 102(b) as being anticipated by U.S. Patent 5,826,237 – Macrae et al. These claims, as amended, are deemed to be patentable for the reasons given below.

Amended claim 1 recites a method and system for assigning an identifier to at least one of a plurality of displayable task schedules. The claimed method includes the activities of a) “initiating display of at least one interface menu supporting user entry of decision information for assigning a task representative identifier to a particular task schedule of a plurality of displayable task schedules associated with a corresponding plurality of different entities, said particular task schedule being associated with a particular entity of said corresponding plurality of different entities”; b) “receiving decision information entered via said at least one interface menu”;

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c) “applying the received decision information”; and d) “assigning, based on the application of the received decision information, the said task representative identifier representing a task to be performed by said particular entity, to the said task schedule associated with the said particular entity in response to a predetermined event”. These features are not shown (or suggested) in Macrae. Independent claims 8 and 15 – 18 include limitations similar to claim 1 and thus have been amended to mirror claim 1.

Macrae et al. neither disclose nor suggest “assigning, based on the application of the received decision information, said task representative identifier representing a task to be performed by said particular entity, to said task schedule associated with said particular entity in response to a predetermined event” as in the present claimed invention. Macrae et al. does NOT mention assigning a task to be performed by a worker, medical device or other entity at all. Further, Macrae et al. does NOT show or suggest “applying” received “decision information” and “assigning, based on the received decision information, said task representative identifier representing a task to be performed by said particular entity, to said task schedule associated with said particular entity in response to a predetermined event” as in the present claimed invention. Macrae is not concerned with *task assignment*.

The Examiner states in his response to Applicants arguments that claim 1 does not specifically require identifying specific entities that perform the task or assigning the task to be performed. Applicant respectfully disagrees with the Examiner’s interpretation of claim 1. As stated above, claim 1 has been formally amended to rearrange the limitations therein and clearly state that the present claimed invention is a method for assigning an identifier to at least one of a plurality of displayable task schedules. Macrae et al. neither disclose nor suggest a system or method for “assigning a task representative identifier to a particular task schedule of a plurality of displayable task schedules” as in the present claimed invention. Additionally, Macrae et al. neither disclose nor suggest that the “plurality of displayable tasks” are “associated with a corresponding plurality of different entities, said particular task schedule being associated with a particular entity of said corresponding plurality of different entities” as in the present claimed invention. Furthermore, Macrae et al. neither disclose nor suggest “said task representative identifier represent[s] a task to be performed by said particular entity” as in the present claimed invention.

As discussed in the previous response, the system of Macrae et al. aims to “provide an apparatus and method for providing a medical healthcare plan

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which will 1) reduce errors associated with communications between healthcare planners and providers; 2) allow for convenient modification of medical health treatment plans; 3) provide costs associated with each step in the medical health treatment plan, as well as the total cost of the medical health treatment plan; 4) reconcile two or more healthcare plans; and 5) copy and transfer medical treatment plans to various medical healthcare providers” (see Macrae et al., column 2 lines 22-31). Therefore, Macrae et al. is concerned with the **fundamentally different** function of treatment plan creation, manipulation communication, processing and assignment to *a patient* NOT a healthcare worker as in the present claimed invention. This is clearly stated in column 5, lines 29 – 32, wherein Macrae et al. describe “[t]he term ‘template’ is used to refer to generic health-care treatment plan, protocol, or guideline. After a template has been assigned to a general patient or client, the template is referred to as a ‘plan’”. Thus, it is clear that the system of Macrae et al. is concerned with solving a problem wholly unlike the problem solved by the present claimed invention.

Applicant respectfully submits that the portions of Macrae et al. cited by the Examiner in his response to Applicants arguments neither disclose nor suggest the innovation as claimed in independent claims 1, 8 and 15 – 18 of the present invention. Specifically, the cited paragraphs disclose a display having graphic icon images that represent a medical treatment plan wherein a first set of graphic images with a second set of graphic images to obtain a combined treatment plan. (see Macrae et al., col. 2, lines 40 – 45). Macrae et al. neither disclose nor suggest “assigning, based on the received decision information, a task representative identifier to a particular task schedule of a plurality of displayable task schedules associated with a corresponding plurality of different entities, said particular task schedule being associated with a particular entity of said corresponding plurality of different entities” as in the present claimed invention. Further, Macrae et al. neither disclose nor suggest that the “said task representative identifier represent[s] a task to be performed by said particular entity” as in the present claimed invention.

It is respectfully submitted that arguments presented in the response dated February 9, 2004 are still applicable. Furthermore, as claims 2 – 7 are dependent on claim 1, that claims 2 – 7 are patentable for the same reasons as claim 1. It is further respectfully submitted that as claims 9 – 14 are dependent in claim 8, that claims 9 – 14 are patentable for the same reasons as claim 8.

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In view of the above remarks, and amendments to claims 1, 8 and 15 – 18, it is respectfully submitted the present claimed invention is not anticipated by Macrae et al. Therefore, it is further respectfully submitted that this rejection has been satisfied and should be withdrawn.

In view of the above amendments and remarks, Applicants submit that the Application is in condition for allowance, and favorable reconsideration is requested.

Respectfully submitted,



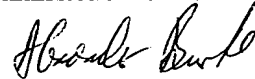
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4 May 2004  
Date